| Fill in this information to identify your case: |                           |                                  |  |  |  |  |
|---|---------------------------|----------------------------------|--|--|--|--|
| Debtor 1  | Phillip Dale Daniels      |                                  |  |  |  |  |
| Debtor 2<br>(Spouse, if filing)                 |                           |                                  |  |  |  |  |
| United States B                                 | Sankruptcy Court for the: | Southern District of Mississippi |  |  |  |  |
| Case number (if known)                          |                           |                                  |  |  |  |  |

| Check as directed in lines 17 and 21: |  |  |  |  |  |  |
|---------------------------------------|--|--|--|--|--|--|
|                                       | According to the calculations required by this Statement:            |  |  |  |  |  |
|                                       | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). |  |  |  |  |  |
|                                       | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).     |  |  |  |  |  |
|                                       | 3. The commitment period is 3 years.                                 |  |  |  |  |  |
|                                       | 4. The commitment period is 5 years.                                 |  |  |  |  |  |

☐ Check if this is an amended filing

## Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - ☐ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

|  |                                      |                             |                           |   |                       | Colum<br><b>Debto</b> |          | Colum<br>Debto<br>non-fi |       |
|--|--------------------------------------|-----------------------------|---------------------------|---|-----------------------|-----------------------|----------|--------------------------|-------|
| our gross wages, salary, tayroll deductions).  | ips, bonuse                          | es, overtime                | and o                     | commissions (befo                           | re all                | \$                    | 6,888.92 | \$                       | 0.00  |
| limony and maintenance ր<br>olumn B is filled in.  | payments. [                          | Oo not include              | e payn                    | nents from a spouse                         | e if                  | \$                    | 0.00     | \$                       | 0.00  |
| Il amounts from any source<br>you or your dependents,<br>om an unmarried partner, m<br>and roommates. Do not include<br>bu listed on line 3. | including of embers of yole payments | child suppor<br>our househo | <b>t.</b> Inclu<br>d, you | ide regular contribu<br>r dependents, parei | tions<br>nts,<br>ents | \$                    | 0.00     | \$                       | 0.00  |
| et income from operating<br>usiness, profession, or fa   | D 1.4                                | or 1                        | D                         | ebtor 2                                     |                       |                       |          |                          |       |
| ross receipts (before all eductions)   | \$                                   | 0.00                        | \$                        | 203.96                                      |                       |                       |          |                          |       |
| rdinary and necessary<br>perating expenses   | -\$                                  | 0.00                        | -\$_                      | 124.00                                      |                       |                       |          |                          |       |
| et monthly income from a usiness, profession, or farm  | \$                                   | 0.00                        | \$_                       | 79.96 he                                    | opy<br>ere -> \$      |                       | 0.00     | \$                       | 79.96 |
| et income from rental and  | other real                           | property                    | Debte                     | or 1  |                       |                       |          |                          |       |
| ross receipts (before all dec  | luctions)                            |                             | \$                        | 0.00  |                       |                       |          |                          |       |
| rdinary and necessary oper   | ating expens                         | ses                         | -\$                       | 0.00  |                       |                       |          |                          |       |
| et monthly income from ren   | tal or other r                       | eal property                | \$                        | 0.00 Copy he                                | ere -> 9              | 6                     | 0.00     | \$                       | 0.00  |

Case number (if known)

|           |  |  |  |                                       | Column A Debtor 1 |             | Column E Debtor 2 non-filing | or           |                                   |
|-----------|--|--|--|---------------------------------------|-------------------|-------------|------------------------------|--------------|-----------------------------------|
| 7.        | Interest.  | dividends, and royalties   |  |                                       | \$                | 0.00        | \$                           | 574.20       |                                   |
|           | •  | pyment compensation  |  |                                       | \$                | 0.00        | \$                           | 0.00         |                                   |
|           |  | nter the amount if you contend that the am   |  | efit under                            |                   |             |                              |              |                                   |
|           | For you  |  | \$   | .00                                   |                   |             |                              |              |                                   |
|           |  | ur spouse  |  | .00                                   |                   |             |                              |              |                                   |
| 9.        | benefit ur<br>not includ<br>United St<br>disability,<br>pay paid<br>does not | or retirement income. Do not include an or retirement income. Do not include an or retirement security Act. Also, except de any compensation, pension, pay, annuitates Government in connection with a distort or death of a member of the uniformed secunder chapter 61 of title 10, then include the exceed the amount of retired pay to which under any provision of title 10 other than or | as stated in the next sent<br>ty, or allowance paid by the<br>ability, combat-related injustrices. If you received ar<br>hat pay only to the extent<br>in you would otherwise be | ence, do he ury or ny retired that it | \$                | 0.00        | \$                           | 0.00         |                                   |
| 10.       | Do not increceived domestic United St disability, sources of                 | from all other sources not listed above. clude any benefits received under the Soc as a victim of a war crime, a crime agains terrorism; or compensation, pension, pay tates Government in connection with a dist, or death of a member of the uniformed so on a separate page and put the total below   | cial Security Act; payment<br>thumanity, or internationa<br>, annuity, or allowance pa<br>ability, combat-related injervices. If necessary, list of                              | s<br>al or<br>aid by the<br>ury or    |                   |             |                              |              |                                   |
|           | <u>_l</u>  | LTD  |  |                                       | \$                | 0.00        | . \$                         | 635.00       |                                   |
|           | _  |  |  |                                       | \$                | 0.00        | \$                           | 0.00         |                                   |
|           |  | Total amounts from separate pages, if any  | <i>/</i> .   | +                                     | \$                | 0.00        | . \$                         | 0.00         |                                   |
| 11.       |  | e your total average monthly income. A umn. Then add the total for Column A to the   |  | \$                                    | 6,888.92          | + \$        | 1,289.16                     |              | 8,178.08  al average nthly income |
| Part      | 2: De  | etermine How to Measure Your Deducti   | ons from Income  |                                       |                   |             |                              |              |                                   |
| 12.<br>13 | Copy you   | ur total average monthly income from I   | ine 11.  |                                       |                   |             |                              | \$           | 8,178.08                          |
| 10.       | _  | are not married. Fill in 0 below.  |  |                                       |                   |             |                              |              |                                   |
|           |  | are married and your spouse is filing with   | vou. Fill in 0 below.  |                                       |                   |             |                              |              |                                   |
|           |  | are married and your spouse is not filing  |  |                                       |                   |             |                              |              |                                   |
|           | Fill i   | n the amount of the income listed in line 1 endents, such as payment of the spouse's   | 1, Column B, that was NO   |                                       |                   |             |                              |              |                                   |
|           | adju   | ow, specify the basis for excluding this inconstruction as separate page.  |  | come dev                              | oted to each      | h purpos    | e. If necessar               | y, list addi | ional                             |
|           | If thi   | is adjustment does not apply, enter 0 belo  NFS Royalties deductions   | W.   | \$                                    | 269.8             | 7           |                              |              |                                   |
|           |  | THE HOYALING AGAINSTIC   |  |                                       |                   | <u>-</u>    |                              |              |                                   |
|           |  |  |  | -                                     |                   |             |                              |              |                                   |
|           |  |  |  |                                       | 260.0             | 7           |                              |              | 200.07                            |
|           |  | Total  |  | \$                                    | 269.8             | <u>'</u>  c | opy here=>                   |              | 269.87                            |
| 14.       | . Your cu  | urrent monthly income. Subtract line 13  | from line 12.  |                                       |                   |             |                              | \$           | 7,908.21                          |
| 15.       | Calcula  | te your current monthly income for the   | year. Follow these steps   | 3:                                    |                   |             |                              |              |                                   |
|           | 15a. C   | opy line 14 here=>   |  |                                       |                   |             |                              | \$           | 7,908.21                          |
|           | M  | lultiply line 15a by 12 (the number of mon   |  |                                       |                   |             |                              | X            | 12                                |
|           |  |  |  |                                       |                   |             |                              |              | 12                                |

**Phillip Dale Daniels** 

Debtor 1

| Debt | or 1  | Phillip         | Dale Daniels  |                                       | Case number (if known)   |                             |   |
|------|-------|-----------------|---|---------------------------------------|--|-----------------------------|---|
| 16   | . Cal | culate tl       | ne median family income that applies to   | ou. Follow these                      | steps:   |                             | _ |
|      | 16a   | . Fill in tl    | ne state in which you live.   | MS                                    |  |                             |   |
|      | 16b   | . Fill in tl    | ne number of people in your household.  | 3                                     |  |                             |   |
|      |       |                 | ne median family income for your state and  |                                       | <br>·  | ¢ 78,140.00                 |   |
|      |       | To find instruc | a list of applicable median income amountstions for this form. This list may also be ava  | s, go online using                    | the link specified in the separate   | Ψ                           |   |
| 17   |       |                 | lines compare?  |                                       |  |                             |   |
|      | 17a   | . ⊔             | Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N  | IOT fill out Calcul                   | ation of Your Disposable Income (Official F                                  | Form 122C-2).               |   |
|      | 17b   | . •             | Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> your current monthly income from line 14 a | ulation of Your D                     |  |                             | y |
| Par  | t 3:  | Calc            | ulate Your Commitment Period Under 11   | U.S.C. § 1325(b)                      | (4)  |                             |   |
| 18.  | Cop   | y your          | total average monthly income from line 1  | 1.                                    |  | \$8,178.08                  |   |
| 19.  | con   | tend tha        | marital adjustment if it applies. If you are to calculating the commitment period under 1 come, copy the amount from line 13.           | married, your sport 1 U.S.C. § 1325(I | ouse is not filing with you, and you o)(4) allows you to deduct part of your |                             |   |
|      | 19a   | . If the m      | narital adjustment does not apply, fill in 0 on   | line 19a.                             |  | -\$269.87                   |   |
|      | 19b   | . Subtra        | ct line 19a from line 18.   |                                       |  | \$                          |   |
| 20.  |       | -               | our current monthly income for the year.  |                                       | •  | 7 000 24                    |   |
|      | 20a   | . Copy li       | ne 19b  |                                       |  | \$7,908.21                  |   |
|      |       | Multiply        | y by 12 (the number of months in a year).   |                                       |  | <b>x</b> 12                 |   |
|      | 20b   | . The res       | sult is your current monthly income for the y   | ear for this part of                  | the form   | \$ 94,898.52                |   |
|      | 20c   | . Copy tl       | he median family income for your state and  | size of household                     | from line 16c  | \$78,140.00                 |   |
|      | 21.   | How d           | o the lines compare?  |                                       |  |                             |   |
|      |       |                 | ne 20b is less than line 20c. Unless otherwieriod is 3 years. Go to Part 4.   | se ordered by the                     | court, on the top of page 1 of this form, ch                                 | neck box 3, The commitment  |   |
|      |       |                 | ne 20b is more than or equal to line 20c. Ur ommitment period is 5 years. Go to Part 4.   | lless otherwise or                    | dered by the court, on the top of page 1 of                                  | this form, check box 4, The |   |
| Par  | t 4:  | Sign            | Below   |                                       |  |                             |   |
|      | By s  | signing h       | nere, under penalty of perjury I declare that   | he information on                     | this statement and in any attachments is                                     | true and correct.           |   |
| )    | ( /s/ | / Phillip       | Dale Daniels  |                                       |  |                             |   |
|      |       |                 | ale Daniels<br>of Debtor 1  |                                       |  |                             |   |
|      | •     |                 | 14, 2025  |                                       |  |                             |   |
|      |       | MM /            | DD / YYYY   |                                       |  |                             |   |
|      | -     |                 | ed 17a, do NOT fill out or file Form 122C-2.  | hio form O : "                        | 20 of that form  | income from the 4.4 shares  |   |
|      | ii yc | ou check        | ed 17b, fill out Form 122C-2 and file it with   | nis ioni. On line                     | os or macronni, copy your current monthly                                    | income nom line 14 above.   |   |

| Debtor 1 | Phillip Dale Daniels | Case number (if known) |  |
|----------|----------------------|------------------------|--|
|          |                      |                        |  |

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 01/01/2025 to 06/30/2025.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment** 

Year-to-Date Income:

Total Year-to-Date Income: **\$41,333.52** from check dated **6/30/2025**.

Average Monthly Income: **\$6,888.92**.

| Debtor 1 | Phillip Dale Daniels | Case number (if known) |
|----------|----------------------|------------------------|
|----------|----------------------|------------------------|

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period **01/01/2025** to **06/30/2025**.

#### Line 5 - Income from operation of a business, profession, or farm

Source of Income: Fric n Frac Pottery
Constant income of <u>203.96</u> per month.
Constant expense of <u>124.00</u> per month.

Net Income **79.96** per month.

#### Line 7 - Interest, dividends, and royalties

Source of Income: Royalties

Income by Month:

| 6 Months Ago: | 01/2025            | \$853.30 |
|---------------|--------------------|----------|
| 5 Months Ago: | 02/2025            | \$772.94 |
| 4 Months Ago: | 03/2025            | \$477.48 |
| 3 Months Ago: | 04/2025            | \$470.29 |
| 2 Months Ago: | 05/2025            | \$508.83 |
| Last Month:   | 06/2025            | \$362.34 |
|               | Average per month: | \$574.20 |

#### Line 10 - Income from all other sources

Source of Income: LTD

Constant income of \$635.00 per month.

#### Non-CMI - Social Security Act Income

Source of Income: SSA

Constant income of \$1,382.00 per month.